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I.

SUCCESSFUL MODE OF TREATING FIS-
TULA OF THE PAROTID DUCT.

A SALIVARY fistula is neither a very pleasant nor tractable complaint, and any mode of treatment which shall prove more successful than those in common use, will undoubtedly be a boon to surgery and surgeons. We have no intention of entering into prolix details respecting fistulæ of the duct of the parotid gland, or duct of Steno, as it is usually termed; we would simply remark that it is rarely met with, and is one of the most obstinate of the salivary fistulæ. When it opens within the mouth, through the mucous membrane lining the cheek, it can scarcely be called a disease, as the fluid in that case is discharged, though not by its original route, into its natural receptacle. But when the opening is situated externally, and the saliva, instead of reaching the mouth, dribbles down the cheek, a train of inconveniences arises, which finally fall under the cognizance of the surgeon, and which it is his interest and business to remedy, if he can. The following case, which occurred in the private practice of M. Roux, will show that eminent operator's methodus operandi.

M. Auguste Godin, a notary at Neuvy, was loading a fowling-

piece, when his powder-flask exploded, and one of the fragments produced a wound in the right cheek. The wound was both deep and wide, and being in the situation of the parotid duct, great pains were taken to procure union by the first intention. Much inflammation, however, succeeded, and the above object was but partially accomplished; suppuration succeeded, and, along with the pus, saliva flowed in considerable quantity. It was now quite obvious that a salivary fistula was established. Cauterization of the edges of the ulcer, and afterwards compression, were employed, but they failed in effecting a cure, and, two months after the accident, M. Godin repaired to Paris, and consulted M. Roux. The fistulous opening evidently communicated with the duct of Steno, and not with the substance of the parotid gland. On introducing an Anel's probe through the natural orifice of the duct, on the inside of the cheek, it was stopped, after a course of about half an inch, by what appeared to be an obliteration of the canal; and the same thing took place on attempting to pass the probe from the fistulous opening without.

Finding that the cavity of the duct was obliterated between the fistula and the orifice in the mouth, M. Roux was convinced that neither the caustic, nor compression,

nor any other similar proceeding could avail, unless a route into the mouth were made for the saliva. M. Roux accordingly proceeded to an operation for that purpose, and first of all exposed the bottom of the fistula, by excising a portion of diseased skin which surrounded the external opening. The next step consisted in making two successive perforations of the cheek, from without inwards, by a hydrocele trocar, taking care to avoid the gum. The openings were made on a horizontal line, and a quarter of an inch distant from each other; the one corresponded directly with the bottom of the fistula, exactly opposite the external opening,—the other was nearer the parotid gland, and close to the anterior border of the masseter muscle. A small seton, composed of silk threads, was then passed through both openings, and the ends tied loosely in a knot, and retained on the outside of the cheek.

A good deal of swelling and inflammation of the cheek succeeded, but were quickly subdued by local applications. A superficial abscess, however, formed close to the parotid gland, and communicated with the wound which had been made in the operation. It was freely opened, and the skin, or rather the old cicatrix over it, was removed, so that the two wounds were laid into one. The saliva continued for some time to flow, in part externally, and in part by the openings into the mouth. Light dressings and gentle compression were employed, and the seton-threads were frequently moved backwards and forwards, in order to render the perforations completely fistulous. At one time strong compression was made on the external wound, but it brought

on a return of inflammation, which extended to the parotid gland itself; it was therefore abandoned. Six weeks after the performance of the operation, the saliva all at once ceased to flow from the wound, which rapidly cicatrized, and soon afterwards the silk thread came away spontaneously. M. G. stopped some time longer in Paris, and the cicatrix which ensued proved to be smooth, regular, and unaccompanied with any appreciable deformity. On the internal membrane of the cheek a transverse sulcus, with slightly elevated margins, could be felt, from which the saliva flowed into the mouth.

We have thought it right to publish the heads of the case, because they display the practice of M. Roux in this troublesome disease. That it ultimately succeeded there cannot be a doubt, but that some other method would not have done as well, perhaps there may. We do not clearly perceive the necessity for establishing two perforations in the mucous membrane of the cheek; indeed, we are convinced that one, of sufficiently ample dimensions, would be simpler and better. The seton thread passed through the two openings, and, including a portion of intervening soft parts, must frequently cut through that portion by ulceration, and lay the openings into one at last; or, at all events, if even they remain distinct, the two can answer no useful purpose, that would not be equally or better answered by a single one. This however is a trifle, and does not affect the principle of the operation, viz., the establishment of an artificial route for the saliva into the mouth. If this be the indication, as it certainly is, it must matter little how the minor steps

of the operation that fulfils it are conducted.—*Jour. Hebdomadaire.* and we proceed to the appearances found on dissection.

II.

FRACTURE OF BONES FROM TRIFLING VIOLENCE IN CASES OF CANCER.

MR. SALTER, a Surgeon of Poole, Dorset, has published two cases of fracture of the thigh that occurred almost spontaneously in patients affected with cancer of the breast. We shall only notice the second case, as in that, examination of the limb, post-mortem, was permitted.

Mrs. Pringle, in October, 1823, had the left breast removed in Guy's Hospital, by Sir Astley Cooper, for scirrhus tumor, but in January, 1824, the disease returned in the cicatrix. In the succeeding July, whilst raising the right thigh in the attempt to get into a cart, the thigh bone broke, about three inches below the trochanter major, with an audible snap, and on the 19th of October the patient died. She was 56 years of age, and had long complained of slight rheumatic pains in the affected limb, which, for about five months prior to the accident, had been converted into violent pain extending from the hip joint to the knee, and appearing deep-seated, as if in the bone. The pain was worse at night, had produced great lameness, and the muscles of the thigh were extremely shrunk. The increase of pain alluded to, she attributed to striking her foot against one of the stairs. A little above the patella, in front of the limb, there had been for some time a slight tumefaction, tender, upon pressure, and depending, it would seem, on thickening of the periosteum. These are the important features of the case,

The muscles of the thigh were pale and shrunk;—a bloody fluid escaped from the capsular ligament of the knee joint;—two or three small clots of blood were contained in the articular cavity;—and, on removing the patella, an ulcer, about the size of a finger nail, was discovered in the upper and external part of its articulating surface. The head of the femur had lost its wonted smooth cartilaginous polish, but was rough and softened in its centre, whilst the thigh bone itself was so soft that a knife could easily be pushed through it, and could readily be bent in any direction, about three inches from either extremity. It was at the upper part of this portion that the fracture had taken place, though the precise point would be difficult to determine, as there seemed to be no entire separation, as occurs in common fractures. The distortion of the limb did not arise from any overlapping, but resulted from a bending of the bone produced by the contraction of the muscles. Those in immediate contact with the trochanters and the upper half of the limb were blended together into an uniform mass, firm and semicartilaginous, of pale red color, with bony spiculæ thickly dispersed through it, and puriform matter slightly tinged with blood. Corresponding to the swelling above the patella, the tendon of the cruræus was much thickened and altered in structure; pus issued from beneath it; and the periosteum was also greatly thickened, and readily separated from the bone. The table of the thigh bone at this part was almost en-

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tirely absorbed quite down to the condyles; the medullary cavity was filled with a bloody pul-taceous substance; and indeed so great was the disorganization, that the author abandons the task of endeavoring to describe it in words, and refers to two drawings made by his pupil, Mr. Bullar, and engraved on stone for the volume of the Transactions which contains the paper.

Mr. Salter, in the remarks he has appended to the case, seems not to be aware that the connexion between cancer and this curious condition of the osseous system has been frequently pointed out by authors on surgery. He observes that Mr. Samuel Cooper is the only author to whose works he has access, in which this disease has been noticed. We can assure Mr. Salter that no less a person than Mr. Cooper's celebrated namesake, Sir Astley, has particularly adverted to the fact in his public Lectures on Surgery, and mentions, if we remember right, the case of a lady whose thigh bone broke, on merely attempting to turn in her bed. We could cite several other authors to establish the correctness of our statement, but really we believe that the occurrence of a morbid state of the bones, in many cases of cancer, is too well known to require any labored disquisition to prove it so. It was but in a very recent number of this Journal that we translated a case from the French, in which the bones of a patient who had died of cancer, fractured in every direction, as the persons engaged in that office were putting her into the coffin. We are not aware, however, that many accurate dissections of the diseased bone, such

as that given to his brethren by Mr. Salter, are met with in works of common circulation, and therefore we have been induced to notice it so fully here. Mr. S. deserves credit for his zeal in laying before the profession what he conceived to be a fact not generally known.—*Medico-Chirurgical Review.*

III.

CANCER OF THE UTERUS.

SIR,—There is no organic disease attended with such excruciating and appalling symptoms as the complaint on which I am now addressing you. When we consider that it is one of the most distressing maladies to which the female part of the community is liable; when we reflect on the agonizing torture it inflicts on these objects of our tender care and solicitude; when we view them bereaved of every hope, and a prey to misery and despair; and when we contemplate how sedulously they are wont to console us in our sorrows, ready and ever willing to pour the balm of comfort into our hearts, and to soothe the language of affliction whenever we stand in need of their sympathizing sorrow, and likewise how largely we are indebted to them for the greater part of the comfort and happiness we enjoy; it cannot but excite in us, who study humanity as well as physic, a more than ordinary zeal to relieve them from the accumulated ills which this disease entails upon them. I have long observed, but not without painful emotions of commiseration, that this distressing complaint,

having hitherto been looked upon as incurable, has not had that attention devoted to it which it deserves; the means that have heretofore been adopted for its relief having been merely palliative. I am fully convinced that in its commencement, before considerable structural derangement be produced, much may be done to obviate it, and after ulceration has taken place, much more remains to be done than has been generally attempted. Now this is one of those diseases for which the whole artillery of three branches of the profession is more essentially necessary to be called into action than any other. In this case, the profession being constituted as it is, possibly may account why so much apathy exists respecting it, and so little has hitherto been done for its removal. As far as my investigations and experience go, it is very gratifying to my feelings to say that this disease is much more under the influence and control of medical assistance, when properly combined with surgical aid, than the generality of the profession are inclined to believe. The symptoms in different patients are so variously modified, that no universal plan can be made applicable to all cases. In its early stage, I have been in the habit of prescribing the tincture of iodine, with an appropriate dose of the solution of the acetate of morphine, night and morning, just sufficient to subdue irritation, using at the same time the warm hip-bath with a small portion of bay salt dissolved in it; and I have been pleased in observing that this plan, in this state of the disease, has been capable of effecting a complete removal of it. In

the more advanced period of the disorder, in addition to what has been previously proposed, I have been compelled to adopt more active means; sometimes I have used injections of extract of lead and elder-flower water, sometimes infusion of digitalis with the superacetate of lead, at other times the decoction of dulcamara with the muriate of ammonia, and where there is much pain, infusions of opium with the acetate of zinc, selecting one or the other, and regulating the strength of the medicine as the case and symptoms may seem to require. In administering these injections, it must be observed that, to be advantageously used, they must be exhibited differently from the mode usually pursued. They must be applied more like ablutions than injections, not with the common syringe, but with an apparatus properly adapted for the intention internally. I have ordered different preparations of iron with decided benefit, and I have sometimes prescribed the liquor arsenicalis with the tincture of henbane. I have also given the fucus helminthocorton with advantage, and this last medicine has been, by my suggestion, exhibited by my worthy friend Mr. Philip Marshall, of Shepton Mallet, to a patient laboring under this distressing affliction, which effected a complete cure. I can with great truth assert that this method, if properly persevered in, even in its more advanced stage, will make the patient not only comfortable, but tend to prevent the progress of diseased action. In the last and most dreadful stage of all, when the afflicted sufferer is deprived of almost every hope,—when, by its

progressive continuance, the uterus has become much increased in size, and the ulcerative process has taken place, accompanied with the most aggravated and distressing symptoms,—here, even here, much more may be done effectually to relieve the complaint, than has generally been contemplated. In this untoward situation, I recommend suppositories of morphine and cicuta, to be applied up the vagina to the uterus, and likewise suppositories of belladonna; but those with the belladonna must be very cautiously exhibited by the vagina to the ulcerated surface; they may, however, be safely applied by the anus: and here I must beg leave to call your attention to an application from which I have found more essential benefit,—which is the oil of tin. Lint moistened in it, and applied by the vagina to the diseased part, I have found a very sedative and soothing application, and I am inclined to think it has a specific power in this disease: by its application alone, I have cured an ulcerated cancer of the breast: by its employment, the pain gradually ceased, the diseased part became more and more exposed, and at last completely sloughed away; healthy granulations succeeded, and the wound healed without any difficulty. If this medicine should not answer the end proposed, the ablutions, with the injunctions previously recommended, should be used, with such quantity of the solution of the acetate of morphine, as is sufficient to alleviate the urgency of the pain: if the discharge should be profuse, instead of these injections, I use the decoction of oak bark and tincture of myrrh; and

if it should be offensive, a solution of the chlorate of soda in a strong emulsion of bitter almonds, with the morphine; giving internally the infusion of the fucus helminthocorton, and keeping up the strength of the patient by bark and other appropriate medicines, attending at the same time, in the several stages of the disease, to the state of the stomach and chylipoietic viscera.

I have thus described some of the general remedies which I have been in the habit of exhibiting with advantage in this disease. I shall make no apology for the length of this communication, the nature of its object being such as entitles it to our best consideration. Callous and insensible must we be to the finer feelings of humanity, if we were not more than ardently solicitous in arresting the progress of the insidious ravages of this malignant complaint, and in exerting our utmost efforts in averting the arrows of death from the seat of life.

I am, Sir, your obedient and
very humble servant,

JOHN TUSON.

Gazette of Health.

IV.

DIABETES.

DR. CHALMERS, an eminent physician of Hull, has published an interesting case of diabetes, in which the hydrosulphuret of ammonia (lately noticed by us as a remedy for the disease) was successfully administered under his direction at the General Infirmary of Kingston-upon-Hull. The patient (a male) about thirty-six years of age, had been for some time a laborer in a fenny part of

Lincolnshire. At the time of being admitted into the institution, he passed saccharine urine to the extent of twenty-eight pints daily, and was affected with the characteristic symptoms of the malady, as excessive thirst, dry and rough skin, wasting of the body, voracious appetite, constipation, &c. The Doctor ordered a warm bath, cupping over the loins, fifteen grains of Dover's powder with two of calomel, to be taken at bed time, and a drachm of compound jalap powder the following morning, with the common diet of the hospital. This treatment having failed to produce any beneficial effect, the Doctor directed a quarter of a grain of emetic tartar, dissolved in an ounce of water, to be taken every second hour, a grain of opium at bed time, a pint of lime water with an equal quantity of milk daily, and the loins to be rubbed twice a day with the ointment of tartarized antimony. The symptoms continuing unabated after this treatment had been adopted four days, the Doctor prescribed the following mixture :—

Take of Hydrosulphuret of Ammonia, 30 drops ;
Pure Water, 6 oz. Mix.

A sixth part to be taken three times a day. To have animal food twice a day.

After continuing the mixture two days, the quantity of urine was reduced to twenty pints in the course of twenty-four hours. To keep up a regular state of the bowels, the Doctor ordered a pill, compounded of calomel, two grains ; bitter apple, four grains ; and croton oil, one drop :—to be taken occasionally. After persisting in the use of these reme-

dies a fortnight, the quantity of the hydrosulphuret of ammonia in the mixture was increased to twenty drops. The warm bath was sometimes employed. During this treatment, the quantity of the urine and the other symptoms gradually abated ; and in the course of six weeks, when he was much more active in his habits, the healthy function of the skin was restored, the appetite and thirst nearly natural, and the quantity of urine, which was less, reduced to seven pints daily, and less saccharine. At this time, when there was every reasonable hope of a favorable termination of the case, he was dismissed the hospital for irregularity.—*Id.*

V.

ULCERATED CANCER, CURED.

By GEO. FIELDING, M.D.

Mrs. C—, æt. 81, June 1st, 1829.—She informs me that, for upwards of fifteen years, she has had a complaint in the right mamma. Without any known cause, she first discovered a small tumor within the breast, near the nipple ; it very slowly and gradually enlarged, retracted the nipple, and puckered the integuments ; she had not constant, but occasional severe darting pains ; these most commonly came on in the night, when they awoke her from sleep. She has been several times ill during this period, and has had medical advice, but did not mention the complaint in her breast. About five weeks ago she slipped and fell, in the house ; hurt her right hip, and “shook” herself a good deal. Soon afterwards, the breast began to give more pain, and distressed her so much that

she was induced to show it to the attending physician and surgeon, who have prescribed up to the present period. For some time previous to the accident, cracks and small openings formed in the integuments, which discharged a thin bloody fluid. There is now an ulceration extending from the outer edge of the pectoral muscle within the axilla, towards the inner edge,—say about four inches in length, and from an inch to two inches in breadth. The broadest part is about the situation of the nipple, of which there is not a vestige remaining. The ulcer here is a very deep excavation, as if the whole middle part of the gland had sloughed away. The edges of this extensive ulcer are ragged and irregular, in some places hanging over, and in others everted; a lurid blush of different breadths surrounds the whole of the edges, but I discover no disease in the neighboring lymphatics. The general aspect of the ulcer is of a foul ash color, except at the outer edge of the pectoral muscle, where there are a few red points. From the state of the cloths removed, the discharge from it, which is thin and pale, must be very considerable, and has the peculiar fœtid odor of this kind of ulcer. The odor is distinguishable on the stair-case, long before entering the room, notwithstanding great pains have evidently been taken to obviate it. Countenance pale and bombycynous; tongue clean; pulse very little above the natural standard. Complaints of restless, feverish nights. Bowels are kept regular. The old lady says the dreadful smell deprives her very much of appetite, as everything she takes is

offensive to her. Her friends were told that the case was nearly hopeless; that all that could be promised was to soothe her, and counteract the horrible fœtor, which was as distressing to her attendants as to herself. I directed the carpet to be removed, a mild diet, some common febrifuge, and the following:—

* R. Coninæ, gr. vi.

Ext. Conii, gr. xxiv. M. div.
in pilul. xij. s. pil. ij. om.
nocte.

R. Solut. Chlor. Calcis 3ij.

Aquæ Fontanæ 3vi. ft. Lotio.
Lint dipped in the lotion to be
applied over the ulcerated sur-
face, and to be kept constantly
moist.

8th.—Ulcer looks much the same, except at the lower side, where the lurid edge has extended every way. This portion of gland and integument is condemned. Has rested better, and is delighted that the offensive smell is removed by the use of the chlorine.

14th.—The remedies have been continued regularly. The ulcer generally looks cleaner; the edges are not so ragged, but the lower part is in a state of sphacelus, and will drop off. Complaints of restless nights, but is not feverish. A moderate opiate substituted for the conium at night.

22d.—Ulcer looks much cleaner everywhere, except at the lower side; red, healthy granulations in various places, particularly in the axilla, where there is a patch of healthy-looking surface. Sleeps pretty well, and takes sufficient food.

July 2d.—Up to this time the

* How is this prepared?—E. G.

appearance of the ulcer has gone on gradually improving. A small cicatrix has formed in the axilla, and at the edge of the pectoral muscle; the upper edge is much flattened, and the lurid redness has nearly disappeared at that part; throughout, good granulations are arising, except at the lower side, where the gland and integument, nearly an inch in depth, and of considerable extent, are gangrenous; but there is a line of separation formed, which looks pretty healthy. Eats and sleeps well. Opiate continued at night, and the following ordered to be taken in the day:—

R. Tinct. Coniæ ʒiss.*

Aquæ Menthæ ʒvi. s. 6 part.
ter die.

6th.—The mortified portion on the lower side has principally dropped off, leaving a deep and foul excavation, but the corresponding edge of the integument looks healthy. Cicatrization going on from the outer edge all round the upper and inner sides of the ulcer. Sleeps well; general health and appearance improving.

14th.—The whole of the blackened parts are removed, and healthy granulations are now fast filling up the cavity, the lower edge approximating them being much flattened. In every other part of the ulcer, cicatrization is proceeding rapidly.

Aug. 4th.—In a few days after the last report, the inferior edge of the ulcer, and the granulations from its base, approximated, and cicatrization went on rapidly all around. There is now only an ulcer, about the size of a half-

crown, in the middle. The general health and appearance are much improved; walks from room to room, and is free from complaint, except a little dyspnœa, which she says has come on the last two or three nights, upon lying down. It was my intention to establish an issue, provided the ulcer went on healing, before complete cicatrization took place; and, upon inquiry, I learnt that she had an issue made about "a certain age," which she healed up many years ago. For the relief of the dyspnœa, a blister was put upon the left side of the chest, and an issue placed in the right arm. Omit the opiate, and continue the conine.

13th.—By these means the dyspnœa was removed in two or three days. The ulcer is now entirely healed, and the cicatrix has a healthy, natural appearance, free from crust or deposition. The old lady seems in good health for her years,—having entered her eighty-second year about a month ago. Throughout the whole of the process of sloughing, the lotion prevented all fœtor, and, as it gave not the slightest pain, was continued until the whole was cicatrized.

Several times during the cure, a slight erythema appeared upon the surrounding sound skin, which was always speedily checked by the application of warm brandy.—*London Medical Gazette.*

VI.

STRANGURY.

DR. JOHN DAVY, of Zante, recommends a small catheter to be introduced into the bladder in cases of strangury from blister plaster, or from canthari-

* The tincture we use contains four grains to one drachm of spirit.

des taken internally. "This treatment," says he, "I have found almost constantly to succeed, not with the view of drawing off the urine, but for the purpose of distending the urethra,

particularly the prostatic portion." The tincture of belladonna rubbed over the perineum with warm fomentations, speedily terminates the most violent attacks of this malady.

SKETCHES OF PERIODICAL LITERATURE.

MESMERISM.

DR. CHENEVIX has published, in the London Med. and Phys. Journal for October, his fifth and last article on Mesmerism. It contains an account of trials of this agent on eleven persons, all of them females, and affected with various diseases. These cases are peculiarly interesting, from the minutes of the phenomena having been taken by Dr. Elliotson, who was an eyewitness, and who appears to have drawn up his statement with great care and accuracy. On ten of the number, no effect was produced except that of sleep, which took place in two or three at variable periods, and may be accounted for, from the circumstances present, without difficulty. The last case is more remarkable; and as,—considering the reputation of the narrator, and his freedom from prejudice,—it contains the strongest testimony to the efficacy of Mesmerism which Dr. C. has published, we shall present it to our readers without abridgment.

"A fourth patient was now seated in the chair. She exhibited no apprehension of any kind, but was talking very cheerfully to me. Mr. C., without saying one word to her, began his manipulations, at the distance of half a foot, but did not touch her. In about one minute she said,

in a plaintive voice, 'Sir, don't do that;' and seemed in great distress. She afterwards told us that Mr. C. drew weakness into her, and made her feel faint. She complained of pain in her abdomen. Mr. C. moved his hands transversely before it, and she said the pain was gone. (She had felt a slight pain there before we saw her.) She then complained of great uneasiness in her chest; and after some transverse movements made by Mr. C. with the intention of removing it, she declared it was gone. The pain in the abdomen returned and ceased, as before, by the manipulations of Mr. C.—Mr. C. then darted his open hand towards one arm, without touching it, and told her to raise both arms. She scarcely could move that which he had thus mesmerized. He then made some transverse passes before it: she at once moved it, and declared the stiffness and uneasiness to be gone. The same was repeated with the other arm, and with the same effect. He told her to lift her feet: she did so with perfect ease. He then darted his hand toward one leg, and she stared with astonishment at finding that she could not stir it without the greatest difficulty. He then made some transverse passes, when she instantly raised it, and said there was neither pain nor stiffness in it. He then closed her eyes, and put a very small piece of paper, weighing perhaps one grain, on her foot, in such manner that it was utterly impossible she could perceive it: she could scarcely move that foot.

The paper was removed in the same manner, and without her knowing it : she could instantly raise her foot. She now complained of pain about the heart : Mr. C. demesmerized her, and she said it was gone. In all these experiments, Mr. C. had most clearly announced to me, in French, what his intentions were ; and the effects coincided so accurately with those intentions, that I confess I was astonished. Deception was impossible. Mr. C. looked round at me, and asked, in French, if I was satisfied. I really felt ashamed to say no, and yet I could scarcely credit my senses enough to say yes. I remained silent. He then asked me, still in a language unintelligible to the patient, ' Shall I bring back a pain or disable a limb for you once more ? ' I of course requested that he would do so. He complied instantly, giving her a pain in the chest once, and disabling her several times from moving her limbs, and removing those effects at pleasure, according to the intentions which he announced to me ; the whole taking place exactly as it had done in every former trial on this woman. As, however, she began to feel faint and uncomfortable, Mr. C. judged it prudent to desist ; assuring me that such experiments as these should never be repeated but with moderation, and only by experienced mesmerizers.

" On questioning the woman, a few days after Mr. C. had produced such decided effects upon her, respecting what had occurred, she declared that he had disabled first one limb, then another, and restored their use, exactly as appeared to be the case ; that she had never felt anything like it in her life before ; that, though she had not slept during the operation, she had felt very drowsy ; that she had not been at all afraid ; but, said she, ' I hope never to see that doctor again, as I am sure he has something to do with the devil.' "

Of the accuracy of this narrative we presume there can be no question ; and it can only be explained by supposing that Dr. C. has acquired, from the habit of exercising his art, and from the confidence which he himself feels, an extraordinary power of affecting the imagination of nervous patients. That this power can be made available to any useful purpose, although possible, it is by no means easy to perceive ; in its application to disease it seems to have produced aggravation rather than relief, and there is no reason to suppose that, under any circumstances, its physical operation can be permanent or important.

MEDICAL STATISTICS.

In a late work by Dr. J. Bisset Hawkins, are some curious facts and speculations connected with this subject. The first chapter of the work contains a comparison of the mortality of ancient and modern times, the result of which is decidedly in favor of the latter. The data on which the calculation is founded, it is confessed, are not very numerous ; but a table is given of the expectation of life at Rome in the third century of the Christian era, which possesses considerable interest. From birth to 20, there was a probability of 30 years ; from 20 to 25, 28 years ; from 25 to 30, 25 years ; from 30 to 35, 22 years ; from 35 to 40, 20 years ; from 40 to 45, 18 years ; from 45 to 50, 13 years ; from 50 to 55, 9 years ; from 55 to 60, 7 years. On the other hand, the modern tables of Mr.

Finlayson give 40 years as the probable duration of life at the age of 20; 29 years at 40; 22 years at 50; and 15 years at 60. Admitting, therefore, that the mode of estimating probability was the same in both calculations, it would appear that the advantage in point of longevity is decidedly on the side of the moderns. Much of this advantage is attributed by Dr. H. to the improvements which have taken place in medical practice. Hippocrates gives an account of thirty-seven cases of continued fever without local affection, treated only by glysters and suppositories; and of these, twenty-one died. Yet there is no disease in which we are accustomed to rely more on the effort of nature to effect a cure, than in fever; and hence the conclusion is irresistible, that medical practice, however undervalued or decried by the ignorant and prejudiced, exerts a most important agency in the diminution of disease and death.

We are by no means disposed to deny the force of the reasoning above stated, or the accuracy of the conclusion obtained, although we cannot believe that the continued fevers of the present day would, if left to themselves, be attended with a fatal result in a majority of the cases. It seems singular, however, that even physicians should so often underrate the efficacy of their own practice, and shut their eyes to the importance of their own art. Hufeland, whose philosophical views on the nature and treatment of many diseases are so well known, maintains on this topic the following remarkable language:—

“After thirty years’ practice, I am now fully convinced, that of all the patients whom I treat, two-thirds would recover without my assistance or that of medicine, and even under the most opposite modes of treatment. The remaining third I divide again into three parts, of which two-thirds would remain alive without my care. Art only enables them to pass through the disease more easily and quickly, and without leaving sequelæ behind. The last third, therefore, or one-ninth of the whole only, might, without my active aid, become the prey of death; and here it is certainly not indifferent *how* the patient is treated; for that mode of cure only which is adapted to the disease and the patient can preserve him; consequently, the *sanatus fuit* may mean no more than that he did not die, or perhaps that he fortunately escaped the mode of cure.”

It is too true, that even the most attentive and successful practitioner must meet with frequent disappointments in regard to the effect of remedies, and will often find himself to have been deceived both in his diagnosis of his cases, and his anticipation of their favorable or unfortunate termination. These occurrences are but the indications of that uncertainty of the art which is conceded on all hands; but to deny that the art itself, in its present state, is a blessing to the human race, is to disregard the authority of reason, and the testimony of daily experience.

EFFECTS OF THE GASTRIC JUICE.

FROM some experiments which have lately been instituted on animals, it would seem that this substance does not possess the power, usually ascribed to it, of eroding the coats of

the stomach during inanition. The secretion of this fluid is in fact rather diminished than augmented during hunger. This state does not produce inflammation of the stomach;

so that where death occurs from this cause, it is not immediately attributable to any local effect, but must be referred to the general prostration of the vital forces.

BOSTON, TUESDAY, DECEMBER 15, 1829.

CUTANEOUS DISEASES.

A NEW and much improved edition of Bateman's Synopsis, and an Atlas of his delineations of cutaneous diseases, has been lately published in England. The Editor, Dr. Thompson, has enriched the work with numerous references, and in the margins of the plates he has indicated the different stages of each disease represented. This last is a very great improvement on the original plan; for these diseases change so much in their progress, that what at one time would be a most accurate picture of a disease, might, at a more advanced period of its course, possess no point of resemblance.

In the Atlas, no larger surface is given than is necessary to show the appearance of the eruption, and by this economy, the delineations are afforded at about a tenth part the cost of Bateman's original plates.

VACCINIA IN THE COW.

It is to be regretted that this disease so rarely affects the animal which first furnished it for the human subject. Attempts have often been made, of late years, to procure from the cow some fresh virus, and every pimple which is discovered on the udder is made the subject of experi-

ment. Several cows in Hyde Park, London, were recently affected with an eruptive disease on the udder, and strong hopes were entertained that it was the cowpox. Two attempts were made to induce that disease in the human system, by this matter, but they proved wholly fruitless. Although it is by no means certain that the vaccine virus has deteriorated, yet such a thing is far from impossible, and it becomes, therefore, very desirable to get a new supply from the cow. Those who are in the habit of noticing these animals, should be reminded by the faculty to watch the part on which the disease originally appeared, and give early notice of any eruptive malady. There certainly can be no reason why it should not exist now and in this country, as well as in any former year, or any other country.

Illustrations of the Peculiar Operation of Medicines on different Classes of Animals.—Medicines have very dissimilar effects on different animals. For the expulsion of worms, or to assist the action of purgatives, two drachms of calomel are often given to the horse; two grains would puke the strongest dog. The reason why persons are enabled to give the excessive and preposterous doses of fifteen or twenty grains is, that the stomach very soon rejects

the whole or the greater part; or if a few grains be retained amidst the rugæ of the stomach, they produce inflammation of the bowels, discharge of blood, and tenesmus. Four ounces of spirit of turpentine may be given to the horse, not only with impunity, but with advantage, in spasmodic colic. One drachm cannot be administered to the dog but with almost certain destruction. From four to eight drachms of aloes are required to purge a horse: the smallest dog requires nearly a drachm; while six or eight grains will purge the largest hog. Castor oil is with dogs as bland and safe a purgative as in the human subject; with opium and some aromatic, it is a specific for spasmodic colic in the dog. In the horse, it is uncertain, irritating, and unsafe. Two grains of the antimonium tartarizatum will vomit the largest, and destroy a small and delicate dog. From two to four drachms are, according to the opinions of some surgeons, given to the horse as a vermifuge or as a nauseant, or a diaphoretic; and a greater quantity has been administered without unpleasant consequences. A drachm of the superacetate of lead would destroy a dog; an ounce has destroyed the horse; a pig will drink almost enough to float him, with impunity.—*Provincial Med. Gazette.*

Anatomy of the Skin.—Dr. Weber, of Leipzig, asserts that the sebaceous follicles of the skin are organs distinct from the bulbs of the hair, and that they exist over the whole surface, excepting the palms of the hands and soles of the feet. The bulbs of the large hair are situated very deeply in the derm, and sometimes penetrate even into the subcutaneous adipose tissue; the sebaceous follicles, on the contrary, are nearer to the cutaneous surface, and are never found extending to the adipose structure. Their size, also, says he, is too large to permit them to be confounded with the bulbs of

the hair, which are much smaller. In new-born children, sebaceous follicles may be discovered on all parts of the skin, with the two exceptions already named. The skin of the scrotum shows them very much developed: each of these follicles is composed of four or five compartments, or cells, agglomerated together; their transverse diameter exceeds their depth. The greatest diameter observed by the author was a quarter of a line.—*N. A. Med. and Surg. Journal.*

Diagnosis of Dislocation from Fracture of the Neck of the Humerus.—The first part of the sixth volume of the Repertoire contains Dupuytren's directions for distinguishing dislocations of the humerus from fractures of its neck. The position of the arm at the time of the fall is one means of discrimination. If it were thrown outwards or forwards to break the fall, so that the hand first struck the ground, dislocation is the more probable accident. If the person have fallen on the shoulder, while the arm was close by the side, fracture is more likely. Even when the patient cannot tell in what manner he fell, much may be gathered from the marks of contusion and abrasion on the hand in the former case, and on the shoulder in the latter. In luxation, if ecchymosis occurs, it is on the inner and fore part of the arm, because it arises from the laceration of the parts on the inner side of the joint. In fracture, in which it is more common, it is on the top of the shoulder itself, because it is produced by the direct contusion. In dislocation, the prominence of the acromion, and the flattening of the deltoid, are greater than they are in fracture. In the latter, the muscle seems shortened and swollen. In luxation, there is a hollow on the inner side of the deltoid, from the removal of the head of the bone. This is less conspicuous in fracture. These, with the differences in the

shape of the bony tumor in the axilla, in the degree of mobility, in the facility of reduction, and with the presence of crepitus in the one, and its absence in the other, sufficiently distinguish the two accidents.—*Glasgow Medical Journal*.

Suspended Animation.—In a memoir presented to the Royal Academy of Paris, M. Leroy condemns full inflation of the lungs in cases of suspended animation. He related some experiments on rabbits and sheep, to prove that "air, driven once with force into the lungs, occasioned sudden death, and that by full inflation, suddenly made, the pulmonary cells are ruptured." In some cases, air was found in the bloodvessels and cellular substance of the lungs. The rapid distension of the stomach with warm water, and the sudden removal of it, by means of an instrument made by Mr. Read for the purpose, by agitating the thoracic viscera, and at the same time diffusing caloric through them and the abdominal contents, are of much greater consequence in cases of suspended animation than inflation of the lungs. By inflating the lungs with cold air, the heart is robbed of the chief vital stimulant, caloric, which the object of treatment should be to increase.

The application of warm water to the head, warm lavements, and dry friction on the surface of the body with warm flannel, and occasional compression of the ribs, are powerful auxiliaries to the rapid injection and ejection of warm water. Indeed, besides electricity and galvanism,

and occasional agitation of the body, what more can be done to bring the vital organs into action?—*Gaz. of Health*.

Strangulated Rupture.—The Editors of the Journal of Medicine, published in Bourdeaux, have given a case of a large inguinal rupture, which had been in a state of strangulation for five days. Numerous attempts to reduce it having failed, Dr. Brulateur was requested to visit him. The Doctor, after examining the tumor, ordered ice to be applied to it, a large dose of castor oil to be administered, and blood to be taken from a vein. This treatment failing, he introduced a bougie, thickly besmeared with purified opium, into the urethra; soon after which the patient fell asleep, during which the rupture disappeared, and soon after awaking, he had two fecal evacuations.—We should certainly have given a preference to the extract of the belladonna, and have introduced it into the rectum, instead of the urethra; or rubbed a solution of it over the tumor,—a practice, the good effect of which we have noticed in a late number.—*Ib*.

Locked Jaw.—An Italian journal relates the case of a woman affected with locked jaw, following a slight wound of the forehead, which was cured by applying the acetate of morphine to a blistered surface on the nape of the neck. Thus applied, it speedily exerted its peculiar antispasmodic powers, although, when administered internally, it proved of no avail.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 3.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 25.	M.	20 yrs	measles		F.	4 yrs	unknown
26.	M.	23	throat distemper	2.	F.	3	convulsions
	F.	75	consumption		M.	35	consumption
	M.	8	unknown		M.	21	dropsy in the head
28.	M.	7 w	lung fever		M.	9 mo	convulsions
29.	M.	45 yrs	consumption	3.	F.	5 yrs	croup
	F.	10 mo	scrofula		M.	21	intemperance
Dec. 1.	F.	52 yrs	consumption		M.	10 mo	infantile
	M.	2	croup				
Males, 11—Females, 6.				Stillborn, 3. Total, 20.			

ADVERTISEMENTS.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830.

Theory and Practice of Physic, by JOHN DELAMATTER, M.D.

Anatomy and Surgery, by J. D. WELLS, M.D.

Midwifery, by JAMES McKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$ 50. Graduating fee, including diploma, \$ 10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$ 30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$ 40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$ 6 each, payable on delivery. Sept. 29. 18202N1D.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.